Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	11D0674486	02/18/2025
Name of Provider or Supplier	**Street Address, City, State**	
Lowndes County Health Department	206 South Patterson Street, Valdosta, GA	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	Summary Statement of Deficiencies
D0000	A recertification survey was performed on February 18, 2025. The facility was found to not be in compliance with all applicable CLIA requirements for specialties /subspecialties for 42 CFR.
D2009	TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1) (b)(1) The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods. This STANDARD is not met as evidenced by: Based on review of the Proficiency Testing (PT) documents from American Association of Bioanalysts(AAB), Medical Laboratory Evaluation (MLE) PT providers, and staff interview, for the years 2023-2024, the laboratory failed to provide a signed attestation statement confirming that the PT specimens were handled in the same manner as patient testing samples. Findings: 1. A review of PT documents, for 2024 (events 1, 2, and 3) confirmed that there were no Attestation Statements available for review for the Specialty of Microscopy. 2. A review of PT documents for 2023 (events 1,2, and 3) confirmed there were Attestation Statements available for review which revealed that approximately 9 nursing supervisors signed the attestation statements as performing the testing of the samples, at their monthly meetings, outside of the normal patient testing processes. 3. Interview with the Laboratory Director, County Nurse Manager, and Nurse Manager of the Lowndes County facility, on 02/18/2025, at approximately 4 pm, in the conference room, confirmed the above aforementioned statements.
D6016	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(4)(i)

	(e)(4)(i) The proficiency testing samples are tested as required under Subpart H of this part; This STANDARD is not met as evidenced by: Based on review of the Proficiency Testing (PT) documents from American Association of Bioanalysts(AAB), Medical Laboratory Evaluation (MLE) PT providers, and staff interview, for the years, 2023 and 2024, the Laboratory Director (LD) failed to ensure that the signed attestation statements confirmed that PT specimens were handled in the same manner as patient testing samples. Findings: 1. A review of PT documents for 2024 (events 1, 2, and 3) confirmed that the LD did not ensure that attestation statements were available for review in the Specialty of Microscopy. 2. A review of PT documents for 2023 (events 1,2, and 3) confirmed that there were attestation statements available for review with approximately 9 nursing supervisor signatures as performing the testing of the samples, at their monthly meetings, outside ofthe normal testing procedures. 3. Interview with the Laboratory Director, County Nurse Manager, and Nurse Manager of the Lowndes County facility, on 02/18/2025, at approximately 4 pm, in the conference room, confirmed that the Laboratory Director did not ensure the appropriate completion of Attestation Statements.